



POST BOX: 631 THIMPHU: BHUTAN

Date:/
ATM/Debit Card Replacement Form
The Branch Manager
T Bank ltd.
Dear Sir/Madam,
The ATM card issued against my Saving Account No:
Current Account No:
Lost Damaged Defective Expired Others (Specify)
hereby declare that I have received the replacement ATM/Debit card from T Bank and I fully understand that I will be using the Green PIN for PIN generation. (Cost of Replacement card is Nu: 200 & credited to Commission on ATM GL # 324010022).
Sincerely,
Applicant's Signature
Name:
Address:
CID No:
Mobile No: